



Patent  
Attorney's Docket No. 033192-007

THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Patent Application of

Terutsugu GOTANDA et al.

Application No.: 09/988,648

Filed: November 20, 2001

For: SHOCK ABSORBING MEMBER  
AND BUMPER

Group Art Unit: 3612

Examiner: K. Patel

Confirmation No.: 8855

RECEIVED

AUG 25 2003

GROUP 3600.

REQUEST FOR CONTINUED EXAMINATION  
TRANSMITTAL LETTER

MAIL STOP RCE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450



21839

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the  
[ ] \$375.00 (2801) [X] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).

1. [ ] A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.

[X] B. Applicant(s) previously submitted the following documents for which continued examination is requested:

[X] Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on July 21, 2003, a copy of which is enclosed.

[ ] Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_.

[ ] Other: \_\_\_\_\_.

2. The following documents are enclosed with this submission:

[ ] Amendment/Reply.

[ ] Affidavit(s)/Declaration(s).

[ ] Information Disclosure Statement (IDS).

[X] Petition for Extension of Time.

[ ] Other: \_\_\_\_\_.

3. [ ] Small entity status is hereby claimed.

[ ] No additional claim fee is required.

[X] The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

08/20/2003 HVUONG1 00000018 09988648

01 FC:1801

750.00 0P

(07/03)

## Request for Continued Examination Transmittal Letter

Application No. 09/988,648Attorney's Docket No. 033192-007

Page 2

C L A I M S					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS THUS PAID FOR	EXTRA CLAIMS	RATE	FEE
Basic Fee					\$750.00 (1001)
Total Claims	22	MINUS 22 =	0	× \$18.00 (1202) =	0.00
Independent Claims	3	MINUS 3 =	0	× \$84.00 (1201) =	0.00
If multiple dependent claims are presented, add \$280.00 (1203)					0.00
Total Fee					750.00
If small entity status is claimed, subtract 50% of Total Fee					0.00
<b>TOTAL FEE DUE</b>					<b>750.00</b>

4. ☒ A check in the amount of \$ 750.00 is enclosed for the fee due.
5. ☐ Charge \$ \_\_\_\_\_ to Deposit Account No. 02-4800 for the fee due.
6. ☐ Applicant(s) requests suspension of action by the Office until at least \_\_\_\_\_, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER &amp; MATHIS, L.L.P.

Date: August 19, 2003

By: Sally A. Ferretti, Reg. No. 46,325  
 for Matthew L. Schneider  
 Registration No. 32,814

P. O. Box 1404  
 Alexandria, Virginia 22313-1404  
 (703) 836-6620